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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/453,397 03/10/2003 *MB*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *MB*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	OH	68	31	1

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## TITLE

## Cash dispensing automated banking machine deposit accepting system and method

<p>FILING FEE RECEIVED 1098</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees ( Filing )</p> <p><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</p> <p><input type="checkbox"/> 1.18 Fees ( Issue )</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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